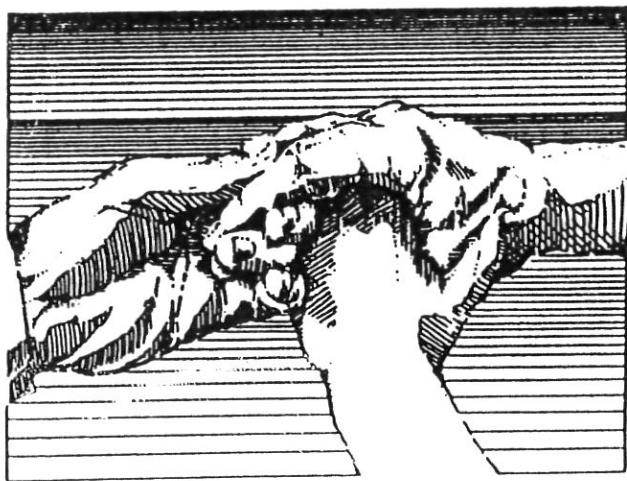


Shipmates

Suicide Prevention in the Navy



Command Religious Ministries Department
USS Bataan (LHD-5)

What is Suicide?

- Suicide is an intentional, self-induced act which results in death
- A suicide attempt is an intentional act causing physical self-harm, where death would have occurred without direct intervention
- A suicide gesture is an intentional act, suggesting a cry for help, causing self-harm or the intent to cause physical self-harm that would not cause death



WHY SUICIDE?

THERE IS NO SIMPLE ANSWER AS TO WHY PEOPLE CHOOSE TO HARM THEMSELVES. USUALLY, WHETHER CAUSED BY EMOTIONS, TRAUMA OR DEPRESSION, THEY JUST WANT TO STOP THE PAIN.

SUICIDAL PEOPLE FEEL HELPLESS AND HOPELESS AND WORTHLESS. THE SITUATION IN WHICH THEY FIND THEMSELVES SEEMS UNBEARABLE AND NEVER-ENDING. THE ONLY SOLUTION AT WHICH THEY CAN ARRIVE -- THE ONLY SOLUTION WHICH THEY THINK WILL STOP THE PAIN -- IS TO KILL THEMSELVES.

SOMETIMES SUICIDAL THOUGHTS AND FEELINGS ARE BUILT UP OVER TIME -- EVENTS SUCH AS:

- A BREAK-UP OR DIFFICULTY IN A CLOSE RELATIONSHIP
- THE DEATH OF A LOVED ONE (FOR CHILDREN AND ADOLESCENTS, THIS OFTEN INCLUDES A PET)
- LOSS OF SUPPORT SYSTEMS OR EMOTIONAL SAFETY (LIKE BEING AWAY FROM HOME)
- LOSS OF SOCIAL OR FINANCIAL STATUS -- DEEP DEBT
- THE DISORIENTING EFFECTS OF ALCOHOL OR DRUGS

WE MAY ALL HAVE ONE OR MORE OF THESE EVENTS OCCUR IN OUR LIVES AT ONE TIME OR ANOTHER...SO WHAT CAUSES ONE PERSON TO CHOOSE TO ATTEMPT TO TAKE THEIR LIFE AND NOT ANOTHER?

THAT'S A HARD QUESTION, BUT THERE ARE SOME SIGNS WE CAN WATCH OUR FOR ...

WHAT ARE THE SIGNS OF SUICIDE?

HERE ARE SOME OF THE COMMON SIGNS THAT SOMEONE MIGHT BE THINKING ABOUT HARMING THEMSELVES:

- WITHDRAWAL. FAILURE TO COMMUNICATE; A DECLINE IN PROFESSIONAL PERFORMANCE; REJECTION OF NORMAL ACTIVITIES; INCESSANT DESIRE TO BE ALONE
- MOODINESS. UNUSUAL OR WIDE SHIFTS OR MOOD; AN EMOTIONAL ROLLER-COASTER
- DEPRESSION. SULLEN AND INTROVERTED BEHAVIOR; CAMOUFLAGED FEELINGS; USING SLEEP AS AN ESCAPE; LOSS OF APPETITE
- AGGRESSION. FIGHTING, THREATS, CRUEL INSULTS, DESTRUCTION OF PROPERTY -- ALL OUT OF NORMAL CHARACTER FOR THE PERSON
- SEXUAL ACTIVITY. INAPPROPRIATE SEXUAL BEHAVIOR; BECOMING SUDDENLY PROMISCUOUS
- EATING HABITS. DRASTIC WEIGHT GAIN OR LOSS; ANOREXIA OR BULIMIA; LOSS OF APPETITE
- GIFT GIVING. GIVING AWAY PRIZED POSSESSIONS; SUDDENLY DECIDING TO MAKE OR CHANGE A WILL FOR NO APPARENT REASON
- TRAUMA. A MAJOR CRISIS OR SERIES OF EVENTS, SUCH AS DIVORCE, DEATH OF A LOVED ONE, OR LEAVING HOME

- PERSONALITY CHANGES. ABRUPT REVERSAL OF WHAT THE PERSON IS NORMALLY LIKE; AN "I DON'T CARE" ATTITUDE; A LESSENERED ENERGY LEVEL; NEGLECT OF RESPONSIBILITY; NEGLECT OF HYGIENE; NEGLECT OF FRIENDS
- ALCOHOL AND DRUG ABUSE. THESE ARE "ESCAPES" -- ANY SUDDEN INDULGENCE OR MISUSE MEANS THE PERSON IS HEADED FOR TROUBLE
- THREAT. ANY COMMENT REGARDING THE DESIRE TO DIE, SUCH AS "I WISH I'D NEVER BEEN BORN;" OR "YOU'RE GOING TO BE SORRY WHEN I'M GONE;" OR "I WANT TO GO TO SLEEP AND NEVER WAKE UP" -- EVEN SOMETHING AS SIMPLE AS "I THINK I'VE WORKED OUT A SOLUTION TO MY PROBLEM"

***IT'S UP TO YOU TO KNOW YOUR
SHIPMATES...
SOMETHING LIKE HAVING A FRIEND
TELL YOU
"GOOD BYE" INSTEAD OF
"GOOD NIGHT"
MAY BE THE ONLY CLUE YOU GET***

WHAT ARE THE MYTHS ABOUT SUICIDE?

THERE ARE ALWAYS SOME 'UNTRUTHS' ABOUT SUICIDE AND PEOPLE WHO ATTEMPT OR COMMIT SUICIDE. HERE ARE SOME IMPORTANT MYTHS YOU SHOULD REMEMBER:

- PEOPLE WHO TALK ABOUT SUICIDE DON'T REALLY MEAN IT
- SUICIDE USUALLY HAPPENS WITHOUT WARNING
- SUICIDAL PEOPLE CAN'T BE TALKED OUT OF IT
- A PERSON'S IMPROVEMENT FOLLOWING A SUICIDAL CRISIS MEANS THE RISK OF SUICIDE IS OVER
- SUICIDE STRIKES MORE OFTEN AMONG A CERTAIN ECONOMIC OR ETHNIC GROUP
- SUICIDE IS HEREDITARY -- IT RUNS IN FAMILIES
- PEOPLE WHO COMMIT SUICIDE ARE PEOPLE WHO ARE UNWILLING TO SEEK HELP
- ONLY CERTAIN PEOPLE ARE THE "SUICIDAL TYPE"
- MOST SUICIDES ARE COMMITTED BY OLDER PEOPLE WITH JUST A FEW YEARS TO LIVE
- WOMEN THREATEN SUICIDE BUT MEN CARRY IT OUT

SO WHAT CAN I DO TO HELP?

IF YOU THINK SOMEONE IS SUICIDAL, IT IS IMPORTANT YOU KNOW WHAT TO DO TO HELP:

- TAKE THREATS SERIOUSLY. TRUST YOUR INSTINCTS; NOT ALL PEOPLE GIVE THE WARNING SIGNS MENTIONED ABOVE
- ANSWER CRIES FOR HELP. THE MOST IMPORTANT THING IS NOT TO IGNORE THE ISSUE; IT'S BETTER TO OFFER HELP EARLY THAN TO REGRET NOT DOING SO LATER; OFFER SUPPORT, UNDERSTANDING AND COMPASSION, REGARDLESS OF YOUR OWN OPINION OR JUDGMENT...THE SUICIDAL PERSON IS HURTING
- CONFRONT THE PROBLEM HEAD-ON. ASK QUESTIONS: "YOU DON'T SEEM TO BE YOURSELF LATELY..CAN I HELP?" OR "IS THERE SOMETHING BOTHERING YOU? WHAT CAN I DO?" OR "ARE YOU FEELING KIND OF DOWN (DEPRESSED)? DO YOU WANT TO TALK ABOUT IT?" DON'T BE AFRAID TO ASK, "ARE YOU THINKING ABOUT HURTING YOURSELF?"
- BE DIRECT. DON'T BE AFRAID TO DISCUSS SUICIDE -- TALKING IS A POSITIVE STEP; BE A GOOD LISTENER; YOU DON'T HAVE TO OFFER ADVICE OR "MAKE THE PERSON FEEL BETTER" 00 ALL YOU HAVE TO DO IS LISTEN, THEN GET HELP
- TELL THEM YOU CARE. BE A FRIEND. PEOPLE ATTEMPT SUICIDE BECAUSE THEY FEEL ALONE AND AFRAID AND HOPELESS; YOU MIGHT BE THE ONE TO LITERALLY THROW THEM A LIFE-LINE
- GET PROFESSIONAL HELP. DON'T LEAVE THIS DECISION UP TO THE PERSON -- GET THE CHAPLAIN, MEDICAL OFFICER, COMMAND MASTER CHIEF, YOUR LPO OR CPO INVOLVED -- GET THEM THE HELP THEY NEED

WHAT DON'T I DO WHEN SOMEONE NEEDS HELP?

THERE ARE SOME THINGS YOU WOULD NEVER DO WHEN YOU KNOW SOMEONE IS THINKING ABOUT HARMING THEMSELVES:

- NEVER LEAVE ANYONE ALONE IF YOU BELIEVE THE RISK OF SUICIDE IS EVEN REMOTELY POSSIBLE
- NEVER ASSUME THE PERSON ISN'T THE "SUICIDAL TYPE" OR IS "ONLY KIDDING" -- IT'S BETTER THEY BE MAD AT YOU IF THEY ARE ONLY JOKING AROUND THAN THEY BE DEAD
- NEVER ACT SHOCKED AT WHAT THE PERSON MAY REVEAL TO YOU ABOUT HOW THEY ARE FEELING -- WHAT MAY BE SILLY OR MEANINGLESS TO YOU MAY BE LIFE-THREATENING TO THEM
- NEVER JUDGE OR DEBATE THE MORALITY OF SELF-DESTRUCTION OR TALK ABOUT HOW IT MAY HURT OTHERS IF THE PERSON HURTS THEMSELVES -- THIS MAY CAUSE EVEN MORE GUILT THAN THEY ARE ALREADY FEELING



IS THERE HOPE?

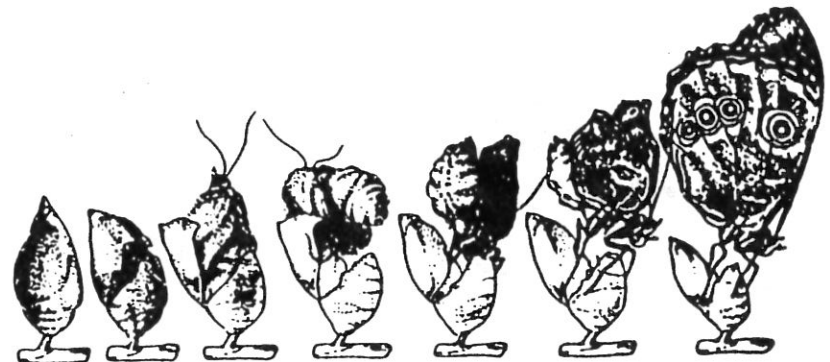
THE ANSWER IS ALWAYS A RESOUNDING
YES!

THERE IS ALWAYS HOPE IN THE MIDST OF WHAT SEEMS TO BE HOPELESSNESS.

THERE IS ALWAYS SOMEONE WHO WILL HELP YOU FIND THE WAY.

THERE IS ALWAYS A WAY BACK TO A NEW AND HEALTHY LIFE.

THERE ARE ALWAYS SHIPMATES WHO CARE ABOUT WHAT HAPPENS TO YOU.



NOTES

Where to Get Help

USS Bataan CDO	7492 [Port QD], 7490 [Stbd QD]
USS Bataan Chaplain	1-66.5-4-Q
USS Bataan Medical	7720
After-hours Duty Chaplain (NAVSTA Norfolk)	444-7156
Base Security (NAVSTA Norfolk)	444-8939
COMPHIBGRU-TWO Chaplain (NAB Little Creek)	464-8124
Suicide Crisis Hotline (24 hrs)	399-6393
Emergency	911

or
go directly to

Emergency
Sewells Point Medical Clinic
(NAVSTA Norfolk)

or
Emergency
Portsmouth Naval Hospital

or
the nearest civilian hospital

**Remember! Never leave a suicidal
person Alone!**





**Command Religious Program Department
USS Bataan (LHD-5)**

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(1997-2000)